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6-24-84

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO. *29060294*

FILING DATE

APPLICANT(S)

122 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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<div style="float: left; width: 100px; text-align: right;">6-2404</div> MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <div style="text-align: center; font-size: 1.2em;">09060294</div>	FILING DATE				
APPLICANT(S)												
CLAIMS												
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
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